

**FAX TRANSMISSION****DATE:** September 2, 2003**PTO IDENTIFIER:** Application Number 09/670756-Conf. #6507  
Patent Number**Inventor:** Kenneth Rhodes, et al.**MESSAGE TO:** J. Murphy**FAX NUMBER:** (703) 872-9306**FROM:** LAHIVE & COCKFIELD, LLP  
Maria Laccotripe Zacharakis, Ph.D., J.D.**PHONE:** (617) 227-7400**Attorney Dkt. #:** AHN-070CP4 (formerly MNI-070CP4)**PAGES (Including Cover Sheet):** 21**CONTENTS:** Amendment Transmittal (1 page)  
Amendment and Response to Office Action (11 pages);  
Substitute 1449 Form (3 pages);  
A Statement of Limited Recognition Under 37 C.F.R. §10.9(b) (1 page); and  
Certificate of Transmission under 37 CFR 1.8 (1 page).

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<b>AMENDMENT TRANSMITTAL LETTER</b>				Docket No. AHN-070CP4	
Application No 09/670756-Conf. #6507	Filing Date September 27, 2000	Examiner J. Murphy	Art Unit 1646		
Applicant(s) Kenneth Rhodes, et al.					
Invention: POTASSIUM CHANNEL INTERACTORS AND USES THEREFOR					
<b>TO THE COMMISSIONER FOR PATENTS</b>					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	20	- 54 =		x	0.00
Independent Claims	8	- 12 =		x	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:</b>					0.00
<input checked="" type="checkbox"/> Large Entity <span style="margin-left: 200px;"><input type="checkbox"/> Small Entity</span>					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-0080</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Maria Laccotripe Zacharakis, Ph.D., J.D. Attorney Reg. No.: LRA				Dated: <u>September 2, 2003</u>	
LAHIVE & COCKFIELD, LLP 28 State Street Boston, Massachusetts 02109 (617) 227-7400					
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. (703) 872-9306, on the date shown below.					
Dated: September 2, 2003		Signature:  (Maria Laccotripe Zacharakis, Ph.D., J.D.)			

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the application of: Rhodes, K. *et al.*

Serial No.: 09/670,756

Filed: September 27, 2000

For: *POTASSIUM CHANNEL INTERACTORS AND  
USES THEREFOR*

Attorney Docket No.: AHN-070CP4  
(Previously MNI-070CP4)

Group Art Unit: 1646

Examiner: Murphy, Joseph F.

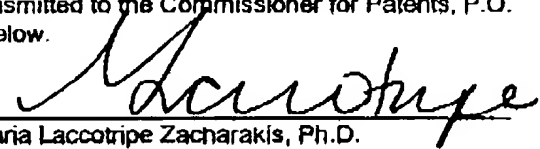
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September 2, 2003  
Date of Signature

By:

  
Maria Laccotripe Zacharakis, Ph.D.  
Attorney for Applicants  
Limited Recognition Under 37 C.F.R. §10.9(b)

**AMENDMENT AND RESPONSE TO OFFICE ACTION**

Dear Sir:

This communication is responsive to the Office Action dated May 30, 2003 (Paper No.: 16). Please amend the above-identified application as follows.

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 4.